MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO.	
101	560314

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED			TER ndment	AF'	AFTER 2 - AMENDMENT	
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CLAIMS		6	22		15	4	
PTO 1260	(DELL LICE	and the same of th					

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TOTAL CLAIMS			1	11.4		

PTO - 1360 (REV. 11/04)

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